

PART B - FEE(S) TRANSMITTAL

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7590 08/21/2008

Albert P. Sharpe, III, Esq.
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7th Floor
1100 Superior Avenue
Cleveland, OH 44114-2518

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Georgeen B. Sonntag	(Depositor's name)
<i>Georgeen B. Sonntag</i>	
(Signature)	
11/18/08	
(Date)	

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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09/771,737	01/29/2001	Raymond J. Sabbagh	D/A0602 XER 2 0376
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1177

TITLE OF INVENTION: AUGMENTED OPERATING SYSTEM PRINTING ARCHITECTURE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
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nonprovisional	NO	\$1440	\$300	\$0	\$1740	11/21/2008
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EXAMINER	ART UNIT	CLASS-SUBCLASS
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EBRAHIMI DEHKORDY, SAEID	2625	358-001150
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1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). <input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. <input checked="" type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.
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1 FAY SHARPE LLP

2 _____

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

XEROX CORPORATION

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

Norwalk, CT

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

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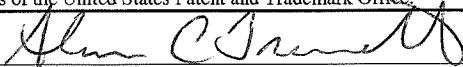
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 The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 24-0037 (enclose an extra copy of this form).

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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature



Date 18 November 2008

Typed or printed name

Alan C. Brandt

Registration No. 50,218

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